

## MENTALLY ILL OFFENDER Program Evaluation Survey

This survey will become part of your county's MIO contract with the Board of Corrections. For purposes of this survey:

- “Program” refers to a defined set of interventions that will be given to a specified research sample in order to evaluate well-stated hypotheses. If you have more than one Program, please fill out a separate survey for each Program.
- “Research Design” refers to the procedures you will use to test the stated hypotheses for your Program. In some instances you will have more than one Research Design for a Program, in which case a separate survey must be completed for each Research Design.
- “Project” refers to all the work that you propose to do with the MIO Grant. For example, if you have two Programs and two Research Designs for each Program, the entire effort would constitute your Project (and you would complete four surveys).

To simplify the task of completing this survey, we refer you to two sources: 1) the initial Research Design Summary Form, and 2) your Program’s responses to the technical compliance issues identified during the grant review. If no additional information was requested of a particular item on the Research Design Summary Form, you can enter the original text into the appropriate space below. If more information was requested, provide a more complete response.

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2. **Program Name:** Current Board of Corrections grant participants have found it useful to pick a name that helps them to create a Program identity (two examples are the “IDEA” Program and the “Home Run” Program). Indicate the title you will be using to refer to

your Program. **Mental Health Treatment Court with Intensive Support Teams** ("MHTC/IST" or simply "MHTC").

3. **Treatment Interventions:** Describe the components of the Program that you will be evaluating. Another way of saying this is, "Describe how the 'treatment' offenders (those in the Program) will be treated differently than the comparison offenders (e.g., services while incarcerated, more intensive supervision, more thorough assessment, a wider range of services, more aggressive case management, better aftercare)."

**The control group will receive the normal level of intervention provided to clients who qualify for mental health services in Santa Barbara County. Services are available to all mental health clients, and do not have a closed time frame. These include:**

- 1) **Assignment to a long-term care team, which maintains approximately a 1:50 staff:client ratio;**
- 2) **Regular court proceedings;**
- 3) **Qualifications for section 8 housing (qualification typically means a wait of of several years for an opening); and**
- 4) **Access to vocational services provided by the State Department of Rehabilitation.**

**In addition to the above, clients who are assigned to the Treatment Court will receive the following services which will not be provided to the control group. Clients in the treatment program will receive these interventions over an 18 month period, after which they will revert to the normal level of care (see above) provided to all mental health clients:**

- 1) **An intensive support team, with special training for working with this population, and who will maintain a smaller, 1:15 staff:client ratio;**
- 2) **A special "track" within the court system, called Mental Health Treatment Court, featuring a single MHTC judge county-wide for all court appearances and a non-adversarial team approach among the Deputy District Attorney, Deputy Public Defender, and Deputy Probation Officer to processing clients in the courts;**
- 3) **Immediate access to section 8 housing vouchers;**
- 4) **UCLA's P.A.L. Skill Training, with modules covering topics such as community re-entry and substance abuse management;**
- 5) **Access to a specialized vocational services, including a horticulture program;**
- 6) **Access to 24 hour wrap-around services in the community; and**
- 7) **An opportunity to participate in a community mentor program called Compeer.**

4. **Research Design:** Describe the Research Design that you will be using. Issues to be addressed here include the name of the design (e.g., true experimental design), the use of random assignment, and any special features that you will include in the design (e.g., the type of comparison group you will use for quasi-experimental designs).

**The evaluation will follow a true experimental design. Once qualified participants are identified, individuals will be assigned to treatment or control groups using a stratified random sampling methodology. First, clients will be categorized into two groups based on whether or**

**not they concomitantly use drugs or alcohol; then, clients from within each block will be assigned to treatment or control groups using a random number chart or on an alternating basis.**

- 4a. Check (✓) the statement below that best describes your Research Design. If you find that you need to check more than one statement (e.g., True experimental and Quasi-experimental), you are using more than one Research Design and will need to complete a separate copy of the survey for the other design. Also, check the statements that describe the comparisons you will be making as part of your Research Design.

<b>Research Design (Check One)</b>	
<input checked="" type="checkbox"/>	True experimental with random assignment to treatment and comparison groups
<input type="checkbox"/>	Quasi-experimental with matched contemporaneous groups (treatment and comparison)
<input type="checkbox"/>	Quasi-experimental with matched historical group
<input type="checkbox"/>	Other (Specify)
<b>Comparisons (Check all that apply)</b>	
<input type="checkbox"/>	Post-Program, Single Assessment
<input type="checkbox"/>	Post-Program, Repeated Assessments (e.g., 6 and 12 months after program separation)
<input type="checkbox"/>	Pre-Post Assessment with Single Post-Program Assessment
<input checked="" type="checkbox"/>	Pre-Post Assessment with Repeated Post-Program Assessments (e.g., 6 and 12 months after program separation)
<input type="checkbox"/>	Other (Specify)

- 4b. If you are using a historical comparison group, describe how you will control for period and cohort effects.

NA

5. **Cost/Benefit Analysis:** Indicate by checking “yes” or “no” whether you will be conducting a Program cost/benefit analysis that includes at least: a) the cost per participant of providing the interventions to the treatment and comparison groups; b) the cost savings to your county represented by the effectiveness of the treatment interventions; and, c) your assessment of the program’s future (e.g., it will continue as is, be changed significantly, be dropped) given the results of the cost/benefit analysis.

Cost/Benefit Analysis	
<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No

- 5a. If you will perform a cost/benefit analysis, describe how that analysis will be performed.

**We are able to perform a rudimentary cost-benefit analysis of the mental health and criminal justice costs for the control and treatment groups, namely the costs of inpatient and outpatient mental health services, processing of criminal charges and jail admission, and jail days. We will compare: a) the treatment vs. control groups at the end of the program; and**

**b) within group comparison of costs for six months before and after program participation for the treatment group.**

- 5. Target Population:** This refers to the criteria that treatment and comparison subjects must meet in order to be able to participate in the research. Target criteria might include diagnostic categories, age, gender, risk level, legal history, geographical area of residence, etc. Please provide a detailed description of the criteria you will be using and how you will measure those criteria to determine eligibility.

**This program will target residents of Santa Barbara County who are booked into the main jail or Lompoc or Santa Maria sub-stations and (a) have a current offense which does not involve a serious act of violence; (b) have at least one prior booking into jail or juvenile hall; and (c) have a serious mental illness as defined by the Welfare and Institutions Code, Section 5600.3. These criteria will be determined by a CLETS review and by a clinical evaluation conducted by the staff psychologist.**

- 6a. Describe any standardized instruments or procedures that will be used to determine eligibility for Program participation, and the eligibility criteria associated with each (e.g., “significant psychopathology” as measured by the MMPI, etc.).

**None**

- 6. Sample Size:** This refers to the number of subjects who will participate in the treatment and comparison samples during the entire course of the research. Of course, in any applied research program, subjects drop out for various reasons (e.g., moving out of the county, failure to complete the program). In addition, there will probably be mentally ill offenders who participate in the Program you will be researching and not be part of the research sample (e.g., they may not meet one or more of the criteria for participation in the research), or they may enter into the Program too late for you to conduct the follow-up the research you intend to do. **Using the table below**, indicate the number of participants who will complete the treatment interventions or comparison group interventions, plus the minimum six months follow-up period after Program completion. This also will be the number of subjects that you will be including in your statistical hypothesis testing to evaluate the Program outcomes. Provide a breakdown of the sample sizes for each of the four Program years, as well as the total Program. Under **Unit of Analysis**, check the box that best describes the unit of analysis you will be using in your design.

<b>Sample Sizes (Write the expected number in each group)</b>		
Program Year	Treatment	Comparison
First & Second Years	0	0
Third Year	70	70
Fourth Year	55	55
Total	<b>125</b>	<b>125</b>

Unit of Analysis ( Check one)			
<input checked="checked" type="checkbox"/>	Individual Offender	<input type="checkbox"/>	Family
<input type="checkbox"/>	Institution	<input type="checkbox"/>	Geographic Area (e.g. neighborhood)
<input type="checkbox"/>	Other	<input type="checkbox"/>	Other:

8. **Key Dates:**

- "Program Operational" is the date that the first treatment subject will start in the Program.
- "Final Treatment Completion" is the date when the last treatment subject in the research sample will finish the interventions that constitute the Program (and before the start of the follow-up period).
- "Final Follow Up Data" is the date when the last follow-up data will be gathered on a research subject (e.g., six months after the last subject completes the treatment interventions or whenever these data will become available).

Program Operational Date: **11/1/1999**

Final Treatment Completion Date: **9/30/2002**

Final Follow-Up Data Date: **3/31/2003**

9. **Matching Criteria:** (Whether or not you are using a true experimental design), please indicate the variables that you will be tracking to assess comparability between the groups. Matching criteria might include: age, gender, ethnicity, socioeconomic status, criminal history mental health diagnosis, etc.

**Age--years**

**Gender--M,F**

**Ethnicity-- Caucasian, Latino, African-American, etc.**

**Criminal History--number of arrests and days incarcerated during six month period prior to MHTC (from CLETS)**

**Substance Abuse -- composite and severity scores from ASI subscales**

**Mental Health diagnosis-- clinical evaluation by mental health practitioner**

- 9a. After each characteristic listed above, describe how it will be measured.

**See above**

- 9b. Which of these characteristics, if unequally distributed between the treatment and comparison groups, would complicate or confound the tests of your hypotheses? How will you manage that problem?

**Our hope is that each of the characteristics listed above will be distributed similarly across treatment and comparison groups. If not, the implications of any incongruities will be assessed by examining the relationship of the variable under question and key outcome measures. If it appears that there is a difference in one or more characteristics across groups and that this difference could confound the interpretation of our findings, we will either use a statistical method, such as an analysis of covariance (ANCOVA) to equate initial levels of a measure, or we will match clients in the treatment and comparison groups and conduct an analysis of outcomes on these matched pairs.**

- 9c. If you are using an historical comparison group, describe how you will ensure comparability (in terms of target population and matching characteristics) between the groups. **NA**
10. **Comparison Group:** The intent here is to document the kind of comparison group you will using. If you are using a true experimental design, the comparison group will be randomly selected from the same subject pool as the treatment subjects (in which case you would enter "true experimental design" in the space below). However, for quasi-experimental designs, the comparison group might come from a number of different sources such as: matched institutions, matched geographical areas, other matched counties, a matched historical group, etc.

Please identify the source of your comparison group.

**True experimental design**

11. **Assessment Process:** The intent here is to summarize the assessment process that will determine the nature of the interventions that the mentally ill offenders in the treatment group will receive. For example, psychological testing, multi-agency and/or multi-disciplinary assessments, etc. Also, describe the qualifications of those who will be doing the assessments.

**Several assessments (i.e., the GAF, BASIS-32, and drug and alcohol subscales from the ASI) will be conducted by the jail based Assessment Coordinator prior to client assignment to treatment or comparison groups. After assignment to groups, additional intake assessments will be conducted: a CLETS review of criminal history (Team Probation Officer); a review of records on psychiatric hospitalizations (Team Clerical Assistant); the Lehman Quality of Life Scale (Mental Health Practitioner or Researcher). These assessments will be part of the evaluation, and will also be used to inform clinical interventions.**

- 11a. Describe any standardized assessment instruments that will be administered to all treatment group subjects for the purposes of identifying appropriate interventions.

**See above**

- 11b Describe any assessment instrument designed by your county that you will use.

**None**

- 11c. Identify which assessment instruments, if any, will also be administered to comparison group subjects.

**The same assessment instruments will be administered to treatment and comparison groups.**

12. **Treatment Group Eligibility:** Indicate the process (as opposed to the criteria) by which research subjects will be selected into the pool from which treatment subjects will be chosen. This process might include referral by a judge, referral by a school official, referral by a law enforcement officer, administration of a risk assessment instrument, etc.

**Assessment for eligibility will be conducted on all individuals who are booked and who are known to, or may, have a serious mental illness. Referrals could be made by receiving, booking, and classification officers at all jail sites; jail mental health staff; inmates, family members, conservators, or County Alcohol, Drug and Mental Health Services staff.**

13. **Comparison Group Eligibility:** Indicate the process by which research subjects will be selected into the pool from which comparison subjects will be chosen. For true experimental designs, this process will be the same as for treatment subjects.

**Same as above**

- 13a. If procedures for determining the eligibility of participants for the Comparison Group differ from those described in 12, please describe them. If different procedures are used, how will you ensure comparability of the two groups in terms of critical characteristics?

*Answer questions 14 - 17 by filling in the table below as instructed.*

Variable	Score/Scale	Additional Information	Significance Test
Reduction of Criminal Activity	No. Arrests, Convictions, & Days in Jail (CLETS)	At the end of treatment & follow-up, and similar 18 & 24 month periods for clients in the comparison group, groups will differ in terms of number of arrest, convictions, & jail days	Analysis of Variance (ANOVA) of between group differences
Reduction of Psychiatric Crises	# Involuntary Hospitalizations & psych. hospital days	At the end of treatment & follow-up, and similar 18 & 24 month periods for clients in the comparison group, groups will differ in their number of involuntary hospitalizations	Analysis of Variance (ANOVA) of between group differences
Improvement in Psychosocial functioning	BASIS-32 GAF	At the end of treatment & follow-up, and similar 18 & 24 month periods for clients in the comparison group, clients in the treatment group will have better psychosocial functioning	Analysis of Variance (ANOVA) of between group differences
Reduction in Substance Abuse	Addiction Severity Index Drug & Alcohol Subscales	At the end of treatment follow-up, and similar 18 & 24 month periods for clients in the comparison group, clients in the treatment group will have less substance abuse	Analysis of Variance (ANOVA) of between group differences
Improvement in Quality of Life	Lehman Quality of Life Scale	At the end of treatment follow-up, and similar 18 & 24 month periods for clients in the comparison group, clients in the treatment group will have a higher quality of life.	Analysis of Variance (ANOVA) of between group differences

14. **Outcome Variables:** In the table below, list some of the most important outcome variables that you are hypothesizing will be positively affected by your Program. Possibilities include improvement in personal functioning, arrest rate, successful completion of probation, alcohol and drug-related behavior, risk classification, etc.
15. **Score/Scale:** To "measure" the effects produced by your Program requires putting the variable in question on some sort of measuring scale (e.g., a test score, a count of occurrences, a rating scale, a change-score indicating progress of some sort). For each variable, for which you are making a hypothesis, indicate in the table below the measurement that you will be statistically analyzing when you test your hypothesis.



16. **Additional Information:** To explain more fully how you intend to test your hypothesis, you might find it helpful to supply additional information. For example, you might intend to partition the data by gender, or make differential hypotheses for different age ranges. Supplying “additional information” is optional; but if there is some aspect of the hypotheses testing that is important for us to know about, please supply the information in this section.
- 16a. For each outcome variable that will not be measured by a standardized assessment procedure, describe the measurement procedures that will be used. For instance, if your county has developed a risk-assessment tool that you will be using to measure change, please describe how it works.
17. **Significance Test:** In order for a statistical procedure to be the appropriate test of a particular hypothesis, certain assumptions must be met. It is critical at the outset of a research design to make sure that the measuring devices, measuring scales, samples, and methodology produce the kind of data that fit the requirements of the intended statistical procedure. In this section, please list your choice for the testing of your hypothesis, given the research design you have chosen, the measurement you will use, and the data you will be collecting.

The following questions are supplemental to the Research Design Summary Form and will help us understand how you intend to manage data collected for this project.

18. What additional background information (if any) will be collected for the participants (both treatment and comparison)? For instance, will you gather information about family criminal background, drug involvement, family variables, work history, educational background, etc. If so, what will be collected and how?

**Work history and educational background will be obtained by the Mental Health Practitioner at Intake.**

19. How will the process evaluation be performed? What components will be addressed and how will they be measured (e.g., services available and frequency of use of those services by each participant)? What is the time frame for gathering process-related information? What recording mechanisms will be used? If descriptive or statistical analyses will be performed, please describe what they will be.

**The process evaluation will consist of a descriptive, qualitative assessment of issues around implementation, as well as a quantitative analysis of (a) who is being served; (b) how the program is functioning; specifically, the number and type of interventions clients are receiving as part of the treatment and comparison groups and (c) how clients change over time, particularly in terms of a reduction in psychiatric symptomatology, functioning, and substance abuse.**

**The descriptive assessment of implementation and implementation issues will focus on information obtained at monthly committee meetings, at which key members of the criminal justice and mental health treatment groups will be present. At least one member of the evaluation staff will attend each meeting and will note progress in implementation as**

well as obstacles which affect planned efforts. This description will be included in the evaluation reports.

**With regard to the quantitative area, demographic characteristics, and client histories, will be obtained by the Jail-based Assessment Coordinator. During treatment, ongoing records of client activities will be maintained (see below). Changes on other process measures (ASI, BASIS-32, GAF) will be obtained by interviewing clients and administering scales at 3, 12 and 18 month intervals by the Mental Health Practitioner (Treatment Group) or the Mental Health Researcher (Control Group). Paired t tests will be used to assess within client changes over time on scales such as the GAF, BASIS-32 and ASI.**

20. Describe how you will document services received by the treatment and comparison group members. Examples are: how many counseling sessions did the subject attend, how intense (and by what measure) was the drug treatment, did the subject complete the interventions, etc.?

**Each contact with the client (including both clinical interventions and judicial proceedings) is documented by members of the Intensive Support Team or long-term care team and entered into the client's medical record. These records will be coded and entered into the County Alcohol, Drug and Mental Health Services Management Information System (MIS) and reported to the Research Team by the Clerical Assistant on a monthly basis.**

21. What will be the criteria for completion of the program (by what criteria will you decide that the research subject has received the full measure of the treatment that is hypothesized to have a beneficial impact. For instance, will the Program run for a specified amount of time irrespective of the participants' improvement or lack thereof? If so, how long? Alternatively, will completion be determined by the participants' having achieved a particular outcome? If so, what will that outcome be and how will it be measured? An example is decreased risk as measured by a "level of functioning" instrument.

**The total period for treatment and Court supervision under this project will be 18 months.**

22. If program completion will be linked to probation terms, how will you record those terms and identify adequate completion? Examples include completion of mental health or substance abuse programs, etc.

**The core members of the Intensive Support Teams in each region of the county include Mental Health Practitioner and Deputy Probation Officers. Each client in the treatment group will have an assigned Probation Officer who accompanies the client to all court appearances and communicates frequently with the MHTC judge regarding compliance with the terms of probation.**

23. On what basis will a subject be terminated from the Program and be deemed to have failed to complete the Program? Will those who leave, drop out, fail, or are terminated from the Program be tracked in terms of the research dependent variables? For how long?

**Departure from the program prior to 18 months occurs only by: a) decision of the MHTC judge with appropriate input from the treatment provider, District Attorney, Public Defender and Probation; or b) choice of the client to terminate his/her enrollment with 30 days notice to Team and continued desire to terminate at the end of a 30 day waiting period, at which time the MHTC is notified to take further action.**

**Clients who drop the MHTC program will be offered the same intervention as that received by the comparison group. If they agree to this less intensive intervention, we will continue to follow them through the duration of the project. If a sufficient number of clients fit into this category (N=10 or more) to allow a separate statistical analysis of their characteristics and outcomes we will do so at the end of the study.**